Supporting Speech: How Can You Help Someone be Better Understood

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Why do folks have trouble speaking?

- Poor speech-motor control
 - -Hard to move articulators
 - -Challenging to coordinate many motor movements for speech
 - May or may not be accompanied by difficulties with oral nonspeech movements
- Difficulty coordinating breath support for speaking

Hearing issues

- Conductive loss- when sound is not transmitted through the ear canal to ear drum and the small bones beyond it.
 - -Reduced hearing, e.g., faint sounds
 - -May be corrected medically or surgically

Hearing

- Sensorineural loss- damage to the inner ear (cochlea) and the nerve paths from the inner ear to the brain
- Permanent loss
- Reduced sound level
- Difficulty understanding speech

Hearing

- Possible causes of sensorineural hearing loss:
 - -Some genetic syndromes
 - -Tumors
 - -Viruses
 - -Head trauma
 - -Noise exposure
 - -Aging

Hearing assessment

- Formal assessment is best
- Audiologist
- If hearing has not been assessed in three-five years; reassess
- For someone with significant communication difficulties, consider a screening annually
- Aging population

Vision considerations

- Speaking of aging...
- Impact on
 - -Reading visual cues
 - -Use of any visual supports

Dysarthria

According to Darley, Aronson and Brown (1975):

- speech disorder resulting from
- a weakness, paralysis, or incoordination of the speech musculature

Dysarthria

- Characterized by:
 - -Slowness
 - -Weakness
 - -Incoordination
 - -Change in tone of speech musculature

Dysarthria

- Can affect all processes involved in speech production:
 - respiration
 - phonation
 - articulation
 - resonance

Dysarthria

• <u>Video example from University of Utah (2001)</u>

Dysarthria

- Damage to the central or peripheral nervous system that impairs the transmission of neural messages to the muscles involved in speech.
- Inability to send appropriate messages to the muscles used for speech

Dysarthria

- May have due to:
 - -Cerebral Palsy
 - -Traumatic Brain Injury
 - -Downs Syndrome
 - -Parkinson's Disease
 - -ALS (Lou Gerhig's Disease)

Dysarthria-What you may hear

- Slurred, jerky, or garbled speech
- Difficult to produce and/or understand
- Problems controlling pitch, loudness, and rhythm when speaking
- Slow speech or rapid, mumbled speech
- Speaking softly or barely able to whisper

Dysarthria-What you may hear or see

- Limited ability to move the tongue, lips, and jaw
- Changes in the voice quality (nasal, hoarse, or stuffy)
- Chewing and swallowing problems
- Drooling or poor control of saliva

http://www.stronghealth.com/services/speechpathology/conditions/treatingdysarth

Dysarthria

Most common errors:

- Imprecise production of consonants
 - -Distortions
 - -Omissions

Dysarthria types-depending on site & size of lesion

- Spastic- increased muscle tone or stiffness
- Flaccid- weakness or reduced muscle tone
- Ataxia- Incoordination of muscles
- Rigidity-consistently increased muscle tone through movement

Yorkston (1996)

Apraxia of Speech

- Motor planning/programming deficient
- Damage to parts of brain responsible for motor programming speech/phonology

(McCaffrey, P.)

May be called Apraxia of Speech or.....

- Apraxia
- Acquired apraxia of speech
- Verbal apraxia
- Dyspraxia (ASHA Apraxia of Speech in Adults)

 Apraxia of speech is often, but not always, accompanied by oral motor apraxia, or an inability to volitionally move the mouth, tongue, lips, cheeks, larynx, and pharynx as directed.

(Halperin, 1986)

Apraxia of speech can be mild or severe.

- People with apraxia may have
 - -difficulty imitating speech sounds
 - -difficulty imitating non-speech movements (oral apraxia), such as sticking out their tongue
 - -groping when trying to produce sounds

Apraxia of speech

Apraxia of Speech

- In severe cases, an inability to produce sound at all
- Inconsistent errors
- More complex words, longer sentences are more difficult

ASHA Apraxia of Speech in Adults

Apraxia of Speech

- Slow rate of speech
- May be able to produce "automatic speech" (*rote speech*), such as greetings like "How are you?"

(ASHA Apraxia of Speech in Adults)

Apraxia of Speech

• Short video sample

Apraxia of Speech

- Initial consonants are misarticulated more frequently
- Errors are **complications** rather than simplifications
- Consonant clusters difficult e.g. sp, tr

Consonant orașters arriteart e.g. sp.

Apraxia of Speech sample

"I am looking an a drawring or a-a pecpicture of what is apparently a tor-nuhner-nor-tornatiuhd blew-brewing in the c-countryside. This is having an nuhnuhmediate and frightening ef-fff-fuhfeckon a fairm famerly num-ber-ing --six uh humans and af-ff-ss-uh-sh-suhsorted farm uh animals." (Darely, et al., 1975)

How can we help

if problem is related to dysarthria?

- Speech therapy is generally effective
- Differ depending on what type of dysarthria
 - -Slowing down
 - -Breath support more pauses
 - -Work on functional phrases vs. discrete motor exercises
 - AAC techniques may be used

Possible Goals of Treatment

- Slowing the rate of speech
- Improving the breath support so the person can speak more loudly

(ASHA Dysarthria)

Possible Goals of Treatment

- Strengthening muscles -best done in the context of speech
- Increasing mouth, tongue, and lip movement by increasing effort (e.g., trying to be louder)

Possible Goals of Treatment

- Improving articulation so that speech is more clear
- Teaching caregivers and family members strategies
- In severe cases, learning to use <u>alternative means of communication</u> (e.g., simple gestures, alphabet boards, or electronic or computer-based equipment)

(ASHA Dysarthria)

Speech supplementation (Yorkston, Hansen, Beukelman, 2004)

 Reviewed 19 studies with individuals with dysarthria (mostly acquired

Supplementation = while speaking

- Use of alphabet board
- semantic cues or
- gestures

Speech supplementation (Yorkston, Hansen, Beukelman, 2004)

- Results:
 - -Supplementation most helpful with severe dysarthria
 - -Alphabet best, then semantic
 - -May see improvement in speech
 - -Listener skill affects success

Speech supplementation (Yorkston, Hansen, Beukelman, 2004)

- Best candidates:
 - -Dysarthria affects communication in natural settings
 - Adequate pragmatic and cognitive skills
 - -Sufficient motor function to generate clues

Tips for the Person With Dysarthria

- Try to limit conversations when tired, your speech will be harder to understand
- If you become frustrated, try to use other methods, such as pointing or gesturing, to get your message across, or take a rest and try again later

(ASHA Dysarthria)

Easy Things You Can Do to Help Someone with Dysarthria

- Give the person ample time to speak.
- Keep the conversation going, even if some words are unclear.
- Encourage the person to use short phrases.

Easy Things You Can Do to Help Someone with Dysarthria

- Encourage gestures, facial expressions, and writing, as well as speaking.
- If you still don't understand the message, ask yes/no questions or have the speaker gesture, draw or point

Easy Things You Can Do to Help Someone with Dysarthria

- Gentle reminders to slow down may be useful.
- Refrain from pointing out mistakes or asking the person to correct speech.
- Face the person when you are

Easy Things You Can Do to Help Someone with Dysarthria

- Reduce background noise in the room.
- If the person wears dentures, make sure that they are in and fitting properly.

(University of Rochester Medical Center)

How can you help? Apraxia

- Main speech therapy focus =
 Repetition, repetition, repetition
- Work to retrain muscles/motor patterns for speech
- Slowing down, pacing

Consider multiple modes

- Speech
- Gestures
- Pointing to visual supports
- Use of speech generating device

Increase use of visual supports

- Pictures/words and/or letter boards
- Premade picture based menus, shopping lists
 - -Attainment Co.
 - -www.attainmentcompany.com/

Increase use of visual supports

- Remnant books- personalized books of "remnants" as topic starters/clarifiers
 - –E.g. movie stub, photo, napkin from restaurant

Visual supports

- Pointing to visual supports while speaking may improve speaker's intelligibility without changing their speech skills at all
- Case example

Speech Generating Device (SCD)

- With more severe, may be part of their communication package
- May use in specific situations
- May use with unfamiliar listeners

Speech therapy resources

- http://www.asha.org/findpro/check in Vermont & New Hampshire
- In Medicaid Funding Guide- list of AAC evaluators

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